

FAMILY AND CHILDREN'S TRUST FUND

Request for Proposal

2004

Program Monitor: Nancy Herrington

Department of Children, Youth and Families
101 Friendship Street 3rd Floor
Providence, RI 02903

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FAMILY AND CHILDREN'S TRUST FUND

REQUEST FOR PROPOSALS 2004

I. INTRODUCTION

The purpose of this Request for Proposals is to establish or expand secondary prevention projects which address issues of child abuse and/or neglect.

Grants up to \$ 50,000 will be available. Lesser amounts may be requested and lesser amounts may be awarded.

Projects will be supported for one year. Continuation of funding is possible at the same or declining levels and will be contingent on reapplication and evaluation of program performance.

Funds to support these projects have been allocated from the Family and Children's Trust Fund (R.I.G.L. 42-72-30).

Terms and Conditions of the Request for Proposal are set forth in Appendices A, B, C, and D.

**** Definition of primary, secondary and tertiary prevention:**

Primary prevention: Efforts aimed at individuals before abuse or neglect occurs. Services for the general population, made available to all, through the media, schools etc.

Secondary prevention refers to those supportive and intervention services offered on a voluntary basis to adults and children, who are considered "at-risk" for abuse and neglect because of their life situation.

Tertiary prevention refers to services offered after abuse or prevention has occurred (i.e. treatment).

II HISTORY

The Trust Fund mission, as established by Legislation (Rhode Island General Laws 42-72-30) enacted in 1983, is to fund start-up or expansion grants to community-based prevention programs aimed primarily at child abuse and neglect.

The Fund is administered by the Department of Children, Youth and Families, in collaboration with the Family and Children Trust Fund Advisory Committee.

Categories of previously funded proposals

- Parent Education group and series
- In-home mentoring programs
- Children's abuse and/or neglect prevention program for fathers

III. ELIGIBILITY FOR FUNDING

Qualifications of the applicant's group (or agency) and characteristics of the proposal are important considerations in determining eligibility for funding.

1. Group (Agency) eligibility:

- a. Trust fund support shall be available to qualified non-profit organizations and agencies as well as community groups, schools, colleges and universities.
- b. Governmental agencies or sub-divisions will be eligible for support only if the program is to be implemented in collaboration with non-profit organization or agency.
- c. The group/agency must be capable of complying with all required State, Federal and local laws, regulations and standards.
- d. The group/agency must be willing to participate in Trust Fund Activities which may include, but not be limited to, public education services that inform the public about child abuse and neglect, evaluation services, resource sharing, consultation, attendance at certain Trust Fund activities, and publicizing their own activities.
- e. The group/agency must have linkages with other community agencies and have the capacity to identify and coordinate services for children and families. The Agency must participate in the Rhode Island Child Abuse Prevention Network.

2. Program (Proposal) eligibility characteristics:

- a. The proposal must address support for families in an effort to reduce child abuse and neglect. The program to be implemented should reflect current best practices in this field.
- b. Innovation in programming will be considered: e.g. application of new methodologies, involvement of new agencies or target population, attempts to implement the program in areas not traditionally served.
- c. In order to reach families effectively, a majority of the services must be delivered in the home.
- d. The Proposal must show linkages to programs that support families where substance abuse and domestic violence may be present.
- e. The Proposal should address a demonstrated need in the community which is currently not being met or is being addressed inadequately.
- f. The Proposal may address itself to secondary prevention efforts (see definitions above) focusing on families with children under six years of age.
- g. The program must address the diversity issues of the children and families served.
- h. The proposal must document the training and supervision methods for staff providing direct services.
- i. Proposal should include a process for collecting outcome data in accordance with the tool provided by the Trust Fund. Training in its use will be provided and will concentrate on the specific tool.
- j. Funds will only be available for new services or to significantly expand existing services.
- k. Programs should have a plan for continued funding beyond the grant period.
- l. The proposal should indicate at least a 20% cash or inkind contribution to the operation of the program from the parent agency or from other local agencies.

IV. PREPARATION OF APPLICATION

- Read all Appendices and Attachments to this Request for Proposals.
- Follow instructions in each Appendix.
- Complete all required attachments.
- Append supplemental material as you like

V. HOW TO SUBMIT PROPOSAL

Please submit proposal sections in the following order:

Section A: Information and Authority statements

- include Attachments A1, A2 .
Be sure that the required signatures are in place.
- Attach copy of Agency's 501c3 designation
- Attach copy of other relevant license, accreditation or certification (e.g. Council on Accreditation, JCAHO, etc.)

Section B: Program Methods: Description of the background leading to creation of the program, specifics about the program to be offered and services to be supported by this grant. Include management and staffing information and outcome evaluation.

- Follow instructions in Appendix B
- Include Attachment B1
- see Attachments B2 and B3 (sample formats for job description and resume. Other formats may be used)

Section C Budget: Itemized detailed budget

- Follow instructions in Appendix C
- Include Budget Summary Sheet and itemized Budget

Section D Letters of Support

- See Appendix D

Appendices Miscellaneous information about your Agency or Program.

Note: Appendix E is for informational purposes only and pertains to the application review process by the Trust Fund Committee.

Appendix F contains Timeline for Application review, and announcement of Awards to grantees.

VI DUE DATE

Proposals must be received at the Department of Child Youth, and Families, no later than 3:30 p.m. on August 9, 2004

Late applications may not be considered.

Applicants must submit a **signed** Assurance (Attachment A-3) and **Six (6) copies** of the entire proposal to:

Ms. Nancy Herrington
Department of Children, Youth and Families
101 Friendship St. 3rd Floor
Providence, Rhode Island 02903

7. REVIEW AND EVALUATION CRITERIA (see appendix E)

Each proposal will be reviewed and evaluated by members of the Trust Fund Advisory Committee. The Committee's recommendations will be forwarded to the Director of the Department of Children, Youth and Families who will make the final award decisions.

During the review process each proposal will be evaluated based on the following criteria (see appendix E for additional detail.)

- Demonstration of understanding of the problem.
- Program objectives
- Program methodology
- Agency organization and management
- Staff capabilities
- Plan to measure program outcome and effectiveness
- Organizational background and prior experience
- Budget

VIII. ADDITIONAL OBLIGATIONS OF SUCCESSFUL GRANTEES

- Participation in Forum/workshops/collaborations
 - It is expected that successful grantees will participate in such workshops, seminars or forums as may be scheduled by the Trust Fund.
 - Such participation might include attendance at technical assistance training sessions, presentation of project results, providing technical assistance to other grantees and peer reviews.

APPENDIX A

TERMS AND CONDITIONS OF THE RFP PROCESS

Successful applicants will be those whose proposals are deemed as best meeting the criteria set forth in the application documents. Final awards are made contingent on the availability of funds and at the discretion of the Review Committee. Successful applicants should not commence activities until they have received a fully executed copy of the contract.

This RFP process does not commit the Review Committee or the Department of Children, Youth and Families to award any contracts, nor to pay the costs incurred in the preparation of a response to this RFP, nor to procure or contract for services.

The Review Committee reserves the right to amend, modify or withdraw this RFP and to reject any proposals submitted, and may exercise such right at any time and without notice and without liability to any applicant or other parties for their expenses incurred in the preparation of a proposal or otherwise incurred. Proposals will be prepared at the sole cost and expense of the applicant.

The Review Committee reserves the right to award contracts to as many or as few applicants as it may select, to accept or reject any or all proposals which do not completely conform to instructions provided and to make awards for lesser amounts than requested.

The proposal of the successful applicant(s) will serve as the basis for the contract.

- F. The Review Committee reserves the right to request and consider additional information from or about any applicant(s) beyond that presented in the initial proposal. The award of the contract, if any, may be made relying on the additional information requested. Such information may include, but not be limited to, budget justification, personnel information, other funding source information, etc. By submitting a proposal, the applicant gives permission to the Department of Children, Youth and Families to make inquiries of third parties with regard to the applicant's experience in matters relevant to this proposal.
- G. This RFP and the resulting programs, if any, are subject to all applicable laws, rules, and regulations promulgated by any Federal, State and Municipal authority having jurisdiction over such. The Department of Children, Youth and Families reserves the right, in its sole discretion, to modify and/or to withdraw this RFP at any time. All proposals pursuant to this RFP are prepared at the sole risk and expense of the preparer.

BASIC DATA SHEET
APPLICATION FOR THE FAMILY AND CHILDREN'S TRUST FUND
101 Friendship Street
Providence, Rhode Island 02903

1. PROGRAM TITLE: _____
2. AGENCY NAME: _____
EXECUTIVE DIRECTOR: _____
ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____
3. CONTACT PERSON FOR PROGRAM ISSUES (if different from above)
NAME: _____
POSITION: _____
ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____
4. CONTACT PERSON FOR FISCAL GRANT MANAGEMENT
NAME: _____
POSITION: _____
ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____
5. ORGANIZATIONAL STATUS: 501(c)(3) : _____ Governmental Agency: _____
Other (explain): _____
FEDERAL EMPLOYEE IDENTIFICATION NUMBER: _____
6. IF APPLICABLE, YEAR & STATE OF INCORPORATION: _____
(this attachment continues)

7. SITE(S) OF PROPOSED PROGRAM:
8. GEOGRAPHIC AREA TO BE SERVED:
9. AGE RANGE OF CHILDREN TO BE SERVED:
10. NUMBER OF CHILDREN TO BE SERVED:
11. NUMBER OF FAMILIES TO BE SERVED _____
12. TOTAL FUNDS REQUESTED:
13. TOTAL IN-KIND FUNDS CONTRIBUTED:
14. NUMBER OF PROGRAM EMPLOYEES:
Full-time ____ Part-time
15. Please list on a separate sheet any current or previously held Federally assisted grants, contracts or subcontracts. Include source, dates, amount and purpose of funds.
Not applicable ____ See separate sheet
16. Please list on a separate sheet any current or previously held State of Rhode Island funded grants, contracts or subcontracts. Include source, dates, amount and purpose of funds.
Not applicable ____ See separate sheet

ASSURANCES

The following page contains a list of assurances. Please read them carefully. The entire list, signed by an authorized program official, must accompany your application. The signature indicates that the program and its staff are prepared to assume full responsibility for these assurances.

Failure to sign this assurance list will eliminate the application from review and consideration for funding.

This program, as indicated by the signature of an authorized program official:

- Agrees to comply with all State regulations, standards and codes.
- Assures that it give access to duly authorized representatives of the State to any books, documents, papers and records or those of its subgrantees, which are pertinent to this procurement and expenditures there under, for the purpose of making audit, examination, excerpts and transcripts.
- Assures that the Provider agrees to comply with the requirements of
 - (1) Title VI of the Civil Rights Act of 1964 (42 USC 2000d et seq.);
 - (2) Section 504 of the Rehabilitation Act of 1973, as amended (29 USC 794);
 - (3) the Age Discrimination Act of 1975, as amended;
 - (4) the Department of Health and Human Services implementing regulations found in 45 CFR, Parts 80, 84 and 91; and
 - (5) Governor's Executive Orders, Number 85-11 and 85-13 which prohibit discrimination on the basis of race, sex, age, national origin, color, religion, handicap or political belief in acceptance for or provision of service or employment in the program and activities, and which mandate employers to maintain a working environment free of discriminatory insults, intimidation and other forms of harassment, including sexual harassment.

(Copies of the above-mentioned requirements shall be made available at the Department.)

- (6) Assures to engage a certified public accountant to perform a post-audit of the operations of the Provider's program under this Contract, in accordance with OMB circular A-128 and A-110 uniform requirements for grants to universities, hospitals and other non-profit organizations.

(this attachment continues)

ASSURANCES continued

- Assures that it will establish a client record system to document and monitor client care. This system must comply with all Federal and State reporting and confidentiality requirements.
- Assures that quarterly reports or any other reports required will be sent on time to the grantor from the sub-grantee.
- Agrees to protect the human rights of its clients by having an independently constituted advisory committee reflecting community values and norms to approve of all program components affecting the rights of the individual client.

Program Name _____

Agency Name _____

Signature of Authorized Program Official

Type or print name of applicant

Signature of Agency Executive Director or CEO

Type or print name of Agency Director

Date

PROGRAM METHODOLOGY

A. PROGRAM SUMMARY: see Attachment B-1

B. DEMONSTRATION OF UNDERSTANDING OF THE PROBLEM (ONE page)

In a one page narrative the applicant should demonstrate familiarity with the problems that contribute to child abuse and neglect including how these impact the program's target population.

C. PROGRAM DESCRIPTION and METHODOLOGY (Maximum FIVE pages)

Please state the objectives and describe the program in a maximum of five pages. This statement should include a description of the target population, the services to be offered, objectives to be attained and the plan for implementation. Indicate those services which will be provided by your agency, and those to be furnished by other community resources.

This section must include the specific objectives and activities of the program.
The following points must also be addressed.

- Indicate the reasons for choosing the target group.
- Indicate the geographic area to be served.
- Describe the outreach methods to be used.
- Describe in detail the in-home services to be provided, how and by whom they will be provided
- Indicate number of service hours per client
- Describe in detail the linkages with Early Childhood Programs (letters of support or agreement should be included in Section D as appropriate)
- Describe linkages with substance abuse and domestic violence programs. (letters of support or agreement should be included in Section D as appropriate)
- Identify the responsibility for each agency in the continuum of service delivery.
- Indicate what problems you anticipate with implementation and methods for dealing with these.
- Describe educational efforts (if any).
- Reference to Curricula to be used (or method to be used to develop these) can be included in an Appendix to your application.
- Itemize work plan necessary to implement the program (identifying major activities, responsible persons, anticipated starting date etc.)

(this appendix continues)

D. PROGRAM EFFECTIVENESS AND OUTCOMES

(additional pages permitted for this section)

Program will collect outcome data in accordance with the tool provided by the Trust Fund.
Program should also identify its own outcome objectives and describe methods for measuring.

E. STAFFING STATEMENT (additional pages permitted for this section)

Include staffing schedule, supervision and personnel evaluation plan.

Include job descriptions of program staff (see attachment B-2 as an example).

Include resumes for identified staff (see attachment B-3 as an example).

F. MANAGEMENT INFORMATION (additional pages permitted for this section)

- Give a one page overview of the agency.
- Include a brief summary of the organizational structure (governing board, its function, frequency of meetings, etc.) An organizational chart can be included, if so, please include names of individuals serving in positions listed.
- Briefly summarize fiscal management system.
- Itemize work plan necessary to implement the program (identifying major activities, responsible persons, anticipated starting date etc).
- Complete Basic Data Sheet (Attachment A-1)

PROGRAM SUMMARY

Provide a **BRIEF** summary of proposed project (NOT TO EXCEED ONE TYPED PAGE).

Include the following:

- A. Population and geographic area to be served.
- B. Objectives of program;
- C. Expected outcomes and innovations;
- D. Brief description of program methodology;
- E. Description of linkages with Early Childhood programs. Identification of linkages with domestic violence and substance abuse programs
- F. Identification of cooperating or sub-contracting agencies and services they will provide in the home.
- G. Funds requested, in-kind funds or services contributed, total program costs

**JOB DESCRIPTION
SAMPLE FORMAT**

POSITION TITLE:

e.g. Teacher aide

QUALIFICATIONS REQUIRED:

Educational requirements or equivalent experience (if applicable)

Knowledge/Skills/Capacities required or include necessary prior experience (e.g Bilingual)

STATEMENT OF DUTIES:

List all tasks assigned to this position

SUPERVISION RECEIVED:

Which individual or what position will directly supervise this individual

SUPERVISION EXERCISED:

Which persons or positions will this individual provide supervision to.

EXAMPLES OF WORK TO BE PERFORMED:

What techniques will be used to discharge the duties stated above.

SAMPLE RESUME

NAME:

ADDRESS:

EDUCATION: (Institution, Degree or Certificate Awarded, Subject Area, Year of Award)

PRESENT OCCUPATION: (Organization, Dates of Employment, Position Title,
Brief Job Description)

PRIOR EXPERIENCE: (Organization, Date of Employment, Position Title,
Brief Job Description)

PROFESSIONAL ASSOCIATIONS:

CIVIC ACTIVITIES:

REFERENCES: (at least three)

All resumes must contain this information at a minimum but should not exceed two typewritten pages.

APPENDIX C

INSTRUCTIONS FOR FISCAL MANAGEMENT AND BUDGET COMPLETION

The applicant must show a realistic plan for use of this grant. The budget must show that revenue is sufficient to cover anticipated expenses.

It is anticipated that these programs will be operational on October 1 of the grant year, therefore an annualized budget must be submitted.

The standard budget forms which must be completed by all applicants are included in the RFP packet. They consist of a Budget Summary Sheet and Itemized Budget Sheets.

1) FISCAL MANAGEMENT:

- Contact person for fiscal matters should be named on Attachment A-1
- Arrangements must be made to draw funds monthly. That is: one twelfth of granted funds to be drawn down.

2) BUDGET SUMMARY SHEET (one page)

- DCYF Funds - This column refers to the funds being requested from the Family and Children's Trust Fund under this RFP, to support the program.
- Other Source of Funds - This column should reflect all other funds (non-Trust Fund) and in-kind contributions that will be used to support the program. The dollar value of in-kind contributions should be listed on the Budget Summary Sheet as well as on the Itemized Budget Sheets. Indicate the total amount of the in-kind portion on the line provided.
- Total Funds - This column is the total of "DCYF Funds" plus "Other Source of Funds" columns.

3) ITEMIZED BUDGET (four pages)

The itemized budget should reflect a line-by-line breakdown of the major areas as listed on the Budget Summary.

Each column must be completed in accordance with the instructions provided above. The dollar value of in-kind contributions must be listed. Note additional instructions on the itemized sheets.

Provider Name _____

DCYF Budget Summary

FY _____

Program Name Fac Id #							TOTAL
REVENUE							
State Funded Programs							
TOTAL STATE FUNDS							
Contracted State Funds							
Other Revenue:							
Client Fees							
Medicaid							
Third Party Ins.							
Donations							
Total Other Revenue							
TOTAL REVENUE							
EXPENDITURES							
Salaries:							
Program Staff							
Admin. Staff							
Total Salaries							
Fringe Benefits							
Total Personnel Costs							

Provider Name_____

							TOTAL
Operating Expenses							
Direct							
a. Consultants							
b. Facilities & Maintenance							
c. Dietary & Housekeeping							
d. Educational & Recreational							
e. Children Benefits							
Indirect (Adm. & General)							
Labor & Overhead							
Total Operating Expenses							
Total Expenditures							

Provider Name: _____

							TOTAL
	FTE / \$	FTE/ \$	FTE/ \$	FTE/\$	FTE/ \$	FTE/\$	FTE/\$
Name/Position							
Program Staff							
Total Program Staff							
Administration							
Total Admin. Staff							
Total Salary Expenses							
Fringe Benefits							
Social Security							
Unemployment							
Health Insurance							
Dental Insurance							
Worker's Comp. Insurance							
Life Insurance							
Disability Insurance							
Retirement							
Total Fringe Benefits							

Provider Name: _____

							TOTAL
Consultants:							
On Call							
Total Consultants							
Facilities & Maintenance							
Property Taxes							
Mortgage Expense							
Property Rental							
Depreciation							
Heat							
Electricity							
Water							
Maintenance Supplies							
Rental Equipment							
Purchased Services							
Other							
Total Facilities & Maintenance							
Dietary Housekeeping:							
Food Costs							
Dietary/Nutritional Consultant							
Kitchen Supplies							
Linen & Bedding							
Housekeeping & Laundry							
Purchased Services							
Total Dietary & Housekeeping							
Educational/Recreational							
Educational Supplies							
Recreation Equipment							
Field Trips							
Other							
Total Education./Recreation.							
Children's Benefits							
Children's Allowance							
Children's Clothing							
Total Children's Benefits							

Provider Name: _____

							TOTAL
Operating:							
Office Supplies							
Telephone							
Emp. Travel @ .31							
Prof./Staff. Dev.							
Advertising							
* Licensing, Dues & Subs							
Accounting							
Legal Services							
Insurance							
Medical Supplies							
Postage							
Printing							
Other							
Total Operating							
Total Direct Operating							
Indirect Expenses (General & Adm.):							
Labor							
Overhead							
Total Indirect Expenses							

APPENDIX D

LETTERS OF SUPPORT

Letters of agreement are needed from agencies which will be providing program components. Specifics regarding the type of service they will be providing should be mentioned in the letter.

Other letters as appropriate may be included.

APPENDIX E (two pages)

(Note: this Appendix is for informational purposes for Applicants.)

PROPOSAL REVIEW AND EVALUATION CRITERIA

Each proposal will be reviewed and evaluated by the Family and Children Trust Fund Advisory Committee and staff from the Department of Children, Youth and Families. Recommendations are made to the Director of the Department of Children, Youth and Families.

Final award decisions will be made by the Director of the Department of Children, Youth and Families.

Evaluation of proposals will be based on the following criteria.

A. PROGRAM METHODOLOGY

1. STATEMENT OF PROBLEM AND PROGRAM OBJECTIVES (20%)

The applicant should demonstrate knowledge of the problems and needs of families at-risk for abuse, neglect, and/or serious family breakdown:

- the goals and limitations of prevention efforts
- the concept of outreach
- the values of child abuse preventative services
- the community context within which these problems may be addressed, and goals can be achieved.

The applicant should demonstrate specific knowledge of the identified target group:

- special needs
- geography
- language accessibility
- need for outreach etc.

Program objectives should address the identified needs and include a method to assess success in meeting the objectives.

2. PROGRAM METHODS (30%)

The Review Committee will assess how the proposal addresses the following:

- * innovativeness
- * outreach efforts and program linkages to Early Childhood programs
- * plan to meet objectives
- * structural development of programming to meet special needs
- * relevance of education efforts to the target groups
- * methods of coordination of services with local community resources (networking)

3. **PROGRAM ORGANIZATION AND MANAGEMENT (10%)**
The Review Committee will consider the adequacy of the proposed organizational structure, staffing schedule, job descriptions. A review of the agency's management practices, record keeping, fiscal control, information gathering, staff coordination, and the agency's ability to meet Federal and State requirements will be part of the process.
4. **AGENCY ORGANIZATION AND PRIOR EXPERIENCE (10%)**
The agency's capabilities in developing programming and providing services to at-risk families and individuals will be important considerations in the review process.
5. **STAFF CAPABILITIES (5%)**
The necessary credentials for each position should be clearly defined. Plans for training and professional supervision should be clearly stated.
The Review Committee will examine the resume or CV (prior experience, education, credentials for the position) of the identified staff members.
6. **PROGRAM EVALUATION (15%)**
The identification of measurable goals, reliable information gathering and use of the information in a self-evaluation process is considered important by the Review Committee.
7. **BUDGET (10%)**
The committee considers important the efficient use of requested funds and matching or in-kind funds.

**APPENDIX F
TIME LINE**

ACTIVITY	DATE
APPLICANT CONFERENCE	JULY 19, 2004, 9:30 am – 11:00 am
PROPOSAL DUE DATE	AUGUST 9, 2004 by 3:30 pm
AWARDS ANNOUNCED	SEPTEMBER 1, 2004
PROGRAM START	OCTOBER 1, 2004

(This is the last page)